This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.

PCT

WORLD INTELLECTUAL PROPERTY ORGANIZATION International Bureau



INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(51) International Patent Classification 5:		1) International Publication Number: WO 91/1607
A61K 43/00, 31/195	A1	3) International Publication Date: 31 October 1991 (31.10.9
(21) International Application Number: PCT/All (22) International Filing Date: 19 April 1991 (30) Priority data: PJ 9726 20 April 1990 (20.04.90) (71) Applicant (for all designated States except US): A IAN NUCLEAR SCIENCE & TECHNOL GANISATION [AU/AU]; Lucas Heights, 1 (AU). (72) Inventors; and (75) Inventors/Applicants (for US only): TURNER, [AU/AU]; Department of Nuclear Medicine, Hospital, P.O. Box 480, Fremantle, W.A. 6 CLARINGBOLD, Phillip, G. [AU/AU]; Dep Oncology, Fremantle Hospital, P.O. Box 480, W.A. 6160 (AU).	USTRA OGY C NSW 2: Harvey Freman 160 (A	ney, NSW 2001 (AU). (81) Designated States: AT, AT (European patent), AU, BB, B (European patent), BF (OAPI patent), BG, BJ (OAI patent), BR, CA, CF (OAPI patent), CG (OAPI patent), CH, CH (European patent), CM (OAPI patent), DE (European patent), DK, DK (European patent), ES (European patent), FI, FR (European patent), G (OAPI patent), GB, GB (European patent), GR (European patent), HU, IT (European patent), JP, KP, KI, LK, LU, LU (European patent), MC, MG, ML (OAI patent), MR (OAPI patent), MW, NL, NL (European patent), NO, RO, SD, SE, SE (European patent), S (OAPI patent), SU, TD (OAPI patent), TG (OAPI patent), US.

(54) Title: BONE MARROW TREATMENTS

(57) Abstract

Haemotological malignancy in an animal is treated by using a polyvalent particle-emitting radionuclide to label a bone-localising chelating agent and administering this agent to affect bone marrow of the animal, but in a dosage close to but less than a level which will cause complete bone marrow ablation, and administering a cytotoxic pharmaceutical in a dose sufficient to affect bone marrow of the animal, but also in a dose close to but less than a level which will cause complete bone marrow ablation. Examples include the use of samarium-153 as the radionuclide and a radio pharmaceutical selected from EDTMP, DTPMP, HEEDTMP, NTMP, TTHMP, HEDP and physiologically acceptable salts thereof. The cytotoxic drug can be melphalan or a derivative or analogue thereof.

FOR THE PURPOSES OF INFORMATION ONLY

Codes used to identify States party to the PCT on the front pages of pamphlets publishing international applications under the PCT.

AT	Austria	ES	Spain	MG	Madagascar
AU	Australia	FI	Finland	ML	Mali
BB	Barbados	FR	France	MN	Mongolia
BE	Belgium	GA	Gabon	MR	Mauritania
	Burkina Faso	GB	United Kingdom	MW	Malawi
BF		GN	Guinca	NL	Netherlands
BG	Bulgaria	_	Greece	NO	Norway
BJ	Benin	GR		PL	Poland
BR	Brazil	HU	Hungary	80	Romania
CA	Canada	IΤ	Italy	SD	Sudan
CF	Central African Republic	JP	Japan		
ĆC	Congo	KP	Democratic People's Republic	SE	Sweden
CH	Switzerland		of Korea	SN	Senegal
CI	Côte d'Ivoire	KR	Republic of Korea	รษ	Soviet Union
СМ	Cameroon	LI	Liechtenstein	TD	Chad
cs	Czechoslovakia	LK	Sri Lanta	TG	Togo
DE.	Germany	w	Lusembourg	us	United States of America
DK	Denmark	MC	Monaco		
DW	Dening #				

اه المنظمية المنظم المنظمية المنظم المنظ - المنظم الم

BONE MARROW TREATMENTS

5

10

15

20

25

30

35

The present invention relates to bone marrow treatments, and more particularly, is concerned with a treatment in which ablation of hone marrow is achieved followed by bone marrow transplantation.

Such treatment is possible and can be a cure for many patients with haematological malignancy such as acute leukaemia and multiple myeloma. It has been found necessary to kill all bone marrow cells. This would be fatal to the patient but for subsequent bone marrow transplantation with healthy bone marrow. If less than all the bone marrow cells are ablated, then natural recovery mechanisms operate through cell regeneration and recurrence of malignancy is likely. Thus, the patient will only enjoy a period of remission. One established technique is to achieve bone marrow ablation with total body irradiation (T.B.I.). Bone marrow transplantation with healthy bone marrow can then take place almost immediately.

It has also been proposed to use chemoradiotherapy techniques to eradicate the haematological malignancy and this treatment immunosuppresses the patient to prevent rejection of the transplanted marrow. However, a significant proportion of patients experience life threatening or fatal non-haematopoietic toxicity, and furthermore, it appears that the procedures are not sufficiently tumoricidal to ensure ablation of a haematological malignancy and neither are the regimens sufficiently immunosuppressive to ensure marrow graft acceptance.

It is also known to use chemotherapy treatment without radiotherapy generally using a combination of drugs with non-additive toxicities exc pt on bone marrow. Common combination regimens usually include non-cross resistant

5

10

15

20

25

30

35

agents with different spectra of antitumour activity, such as nitrosoureas (BCNU), epipodophylotoxins (VP-16) and alkylating agents (thiotepa, cyclophosphamide or melphalan). Melphalan is a drug which has been used alone for attempts at bone marrow ablation. However, for multiple myeloma the success rate is very low for achieving complete clearance of the myeloma and there is significant morbidity and mortality.

Accordingly, it would be desirable to provide a regimen which involves less risk to the patient of life-threatening or fatal conditions and to develop a regimen which would have a high probability of achieving successful cure and not merely a remission.

The present invention is based on the concept of using a radiopharmaceutical comprising a polyvalent particle-emitting radionuclide and a chelating agent which has strong localisation on bone, the irradiation being less than the level which would be fatal in the absence of further treatment steps; administering a cytotoxic compound which affects bone marrow but at a dosage less than that would be fatal in the absence of other treatment; and after allowing for the effects of the radionuclide and cytotoxic compound to dissipate, effecting a bone marrow transplantation.

In one aspect, the invention manifests itself in a method of treatment of an animal such as a human being, and in another aspect, manifests itself in a treatment kit for the procedure.

Preferably, the radiation emits principally beta radiation which is short range but highly effective for cell ablation.

One convenient beta-emitting radionuclide is samarium-153 but there are many other possible radionuclides such as strontium-89, yttrium-90, ruthenium-103, indium-115, cerium-144, gadolinium-159, holmium-166, ytterbium-175, lutecium-177, and rhenium-186.

The sel ction of ch lating agent referably involves a

~..

5

10

15

20

25

30

35

selection of one which can be labelled with strong attachment by the radionuclide, and the resulting complex should be highly specific to bone. For example, polyaminepolyalkylphosphonic acids and derivatives including physiological salts thereof can be selected with advantage. An important example of such a compound is ethylenediaminetetramethylene phosphonate (EDTMP) which is a known chelating agent and is readily labelled with samarium-153 and has been found to localise on the surface of cortical and trabecular bone. Other chelating agents in this class are:

diethylenetriaminepentamethylenephosphonic acid (DTPMP),

hydroxyethylethylenediaminetrimethylenephosphonic acid (HEEDTMP),

nitrilotrimethylenephosphonic acid (NTMP),
 tris(2-aminoethyl)aminehexamethylenephosphonic acid
(TTHMP),

HEDP, or

physiologically acceptable salts of any one of these compounds.

The choice of cytotoxic compound includes melphalan (described in U.S. patent Nos. 3,032,584 and 3,032,585) and related compounds including equivalent chemotherapeutic agent with a predominantly myelotoxic action.

A preferred embodiment of the invention comprises the use of EDTMP labelled with samarium-153 administered at a high but sub-lethal level. However, it is thought that although samarium-153 labelled EDTMP is myelosuppressive, complete marrow ablation is not achieved even with very high dosage levels. Attempts to produce complete marrow ablation in dogs and rabbits have been reported as not successful, and further studies by the present inventor indicate that in rats samarium-153 EDTMP alone is unlikely to completely ablate red marrow.

Another embodiment consists in th use of rhenium-186

5

10

15

20

25

30

35

labelled HEDP.

Preferably, the treatment comprises delaying administration of the cytotoxic drug for several days to allow substantial radioactive decay of the radiopharmaceutical.

For illustration purposes only, reference will be now made to the accompanying drawings which illustrate trials in rats.

Referring first to Figure 1, the graph illustrates platelet concentration in the blood with time following a lethal total body irradiation in rats. The irradiation caused marrow ablation and the non-irradiated control example of rats (7 in number) maintained a substantially constant platelet concentration in blood. The irradiated sample of 5 rats showed a decline in platelet concentration in accordance with the normal decline of platelet concentration in the absence of fresh platelet generation by marrow. This model established the validity of monitoring platelet concentration as an indicator of bone marrow ablation.

Figure 2 demonstrates the viability of marrow transplantation after total body irradiation, i.e. marrow ablation. The control sample with no marrow transplantation showed all rats died within about 10 days but a very high survival rate was achieved with those that received marrow transplantation.

Figure 3 is a graph of platelet concentration with time. A lethal total body irradiation is given to the sample and marrow transplantation effected. By day 10, platelet concentration had dropped to a potentially fatal level. However, the increase in platelet concentration demonstrated that the transplantation had been effective and bone marrow cell reproduction had occurred to rescue the animals and a normal platelet concentration was achieved by day 15.

Figure 4 demonstrates the use of samarium-153 EDTMP at a rate of 3.5 GBq instead of total body irradiation.

Samarium-153 EDTMP was prepared according to published methods (Turner et al 1989 Eur.J.Nucl.Med.15: 784-795). Briefly, Samarium-153 was prepared by neutron irradiation of Sm_2O_3 (enriched to 98% Samarium-152) in the HIFAR Research Reactor, Australian Nuclear Science and Technology Organisation, using a thermal flux of 5 x Samarium-153 was supplied as a sterile $10^{13} \text{ncm}^{-2} \text{s}^{-1}$. solution of 153 Sm Cl_3 in physiological saline and was added to a lyophyllized EDTMP kit immediately prior to use. Again the control sample had a steady platelet concentration but the irradiated sample showed that although the platelet concentration had dropped close to the level at which the animal's life is threatened, spontaneous recovery occurred and this is thought to be due to the fact that the samarium-153 EDTMP may not cause complete marrow ablation.

Referring now to Figure 5, the effect on rats of melphalan at varying dose rates is indicated. It is only when dosages of around 9 mg/kg are given that survival is threatened, but then a precipitous result is observed. On this basis, in rats, a dose of about 9.5 mg/kg would be close to the fatal dose for most individuals.

Figure 6 demonstrates survival rate after chemoand/or radiotherapy treatment comprising 9.5 mg/kg Melphalan and samarium-153 EDTMP administered at 555mBq.

A control with melphalan alone indicated 100% survival. A sample comprising the samarium and melphalan but without marrow transplantation produced a low survival rate of about 20%. The third line demonstrates a sample of 13 individuals treated with samarium-153, melphalan, and given a marrow transplant at day 3, and again a survival rate of about 20% only was achieved. This result indicates that the transplantation was not successful due to the half-life of the radionuclide, and marrow transplantation needs to be delayed until the effects of the internal endoradiotherapy have diminished.

Figure 7 indicates the result of d laying marrow transplant until six days after the commencement of the

10

15

20

25

30

procedure. In this case, the procedure commenced with samarium endoradiotherapy, and five days later the cytotoxic compound melphalan was administered. On day six, marrow transplantation occurred, and in the control sample which did not receive the transplantation, the survival rate was approximately 20% whereas for those individuals receiving the transplant the survival rate exceeded 90%.

10

5

15

20

25

30

WO 91/16075 PCT/AU91/00155

- 7 -

CLAIMS

5

10

20

bone-localising chelating agent, a supply of polyvalent particle-emitting radionuclide for labelling the chelating agent, and a cytotoxic drug, the radionuclide and cytotoxic drug being in a dosage which when administered in combination will cause bone marrow ablation in animals, each dosage being close to but less than a level which will cause complete bone marrow ablation.

- 2. A pharmaceutical as claimed in claim 1, wherein the radionuclide is selected from the group consisting of samarium-153, strontium-89, yttrium-90, ruthenium-103, indium-115, cerium-144, gadolinium-159, holmium-166, ytterbium-175, lutecium-177, and rhenium-186.
- 3. A pharmaceutical as claimed in claim 1 or claim wherein the radiopharmaceutical is selected from EDTMP, DTPMP, HEEDTMP, NTMP, TTHMP, HEDP and physiologically acceptable salts thereof.
 - 4. A pharmaceutical as claimed in any one claims 1 to 3 and wherein the cytotoxic drug is melphalan or a derivative or analogue thereof, or a chemotherapeutic agent with a predominantly myelotoxic action and substantially equivalent to melphalan.
- in an animal being comprising administering a
 bone-localising radiopharmaceutical labelled with a
 polyvalent particle-emitting radionuclide to affect
 substantially bone marrow of the animal, administering a
 cytotoxic pharmaceutical in a dose sufficient to affect
 substantially bone marrow of the animal, the combined doses
 of the radio pharmaceutical and the cytotoxic pharmaceutical
 being chosen to cause bone marrow ablation, after a delay
 sufficient to allow substantial decay of the
 radiopharmaceutical, effecting a bone marrow transplantation.

WO 91/16075 PCT/AU91/00155

- 8 -

- 6. A method as in claim 5 wherein the radiopharmaceutical is labelled with a radionuclide selected from the group consisting of samarium-153, strontium-89, yttrium-90, ruthenium-103, indium-115, cerium-144, gadolinium-159, holmium-166, ytterbium-175, lutecium-177, and rhenium-186.
- 7. A method as in claim 5 or claim 6, wherein the radiopharmaceutical is selected from EDTMP, DTPMP, HEEDTMP, NTMP, TTHMP, HEDP and physiologically acceptable salts thereof.
- 8. A method as in any one of the claims 5 to 7 wherein the cytotoxic drug is melphalan or a derivative or analogue thereof or a chemotherapeutic agent with a predominantly myelotoxic action and substantially equivalent to melphalan.
- 9. A method as in any one of claims 5 to 8 wherein the cytotoxic drug is administered a few days after the radiopharmaceutical, and the bone marrow transplantation is delayed of the order of a day after administering the cytotoxic drug.

25

5

10

15

20

30

LETHAL TOTAL BODY IRRADIATION IN WAG RATS

PLATELET CONC. (x109/L)

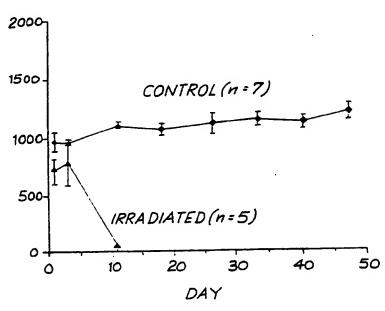


FIG. 1

SURVIVAL AFTER TBI & MARROW TRANSPLANTATION

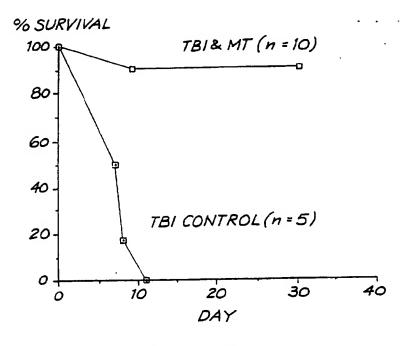


FIG. 2

MARROW TRANSPLANTATION AFTER LETHAL TBI

PLATELET CONC. (x109/L)

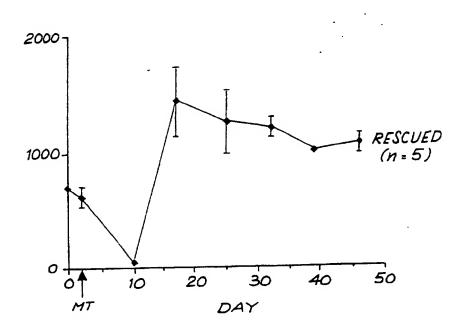


FIG. 3

IRRADIATION BY SAMARIUM-153-EDTMP: 3.5 GBq IV.

PLATELET CONC. (x 109/L)

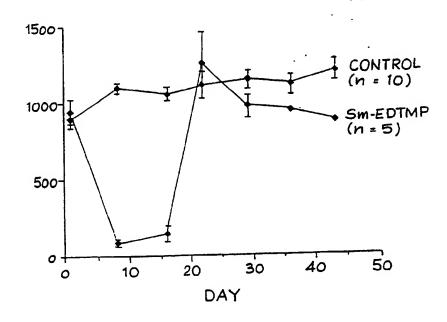


FIG. 4

SURVIVAL AFTER 0.5 -10.0 mg/kg MELPHALAN IP.

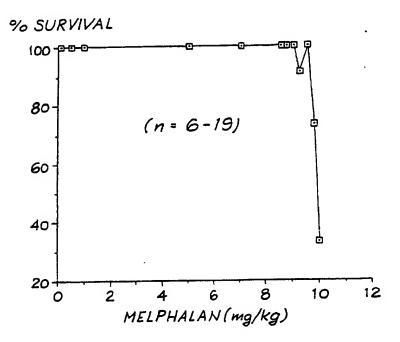


FIG.5

SURVIVAL AFTER CHEMORADIOTHERAPY: 9.5 mg/kg MELPHALAN and 555 mBq/kg 153Sm-EDTMP

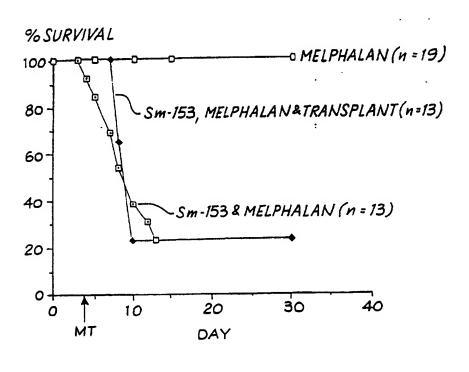


FIG. 6

SURVIVAL AFTER SEQUENTIAL CHEMORADIOTHERAPY:

555 mBa/ka 153 Sm EDTMP	DAY	0
9.5 mg/kg MELPHALAN	"	5
555 mBq/kg 153 Sm EDTMP 9.5 mg/kg MELPHALAN MARROW TRANSPLANTATION	02	6

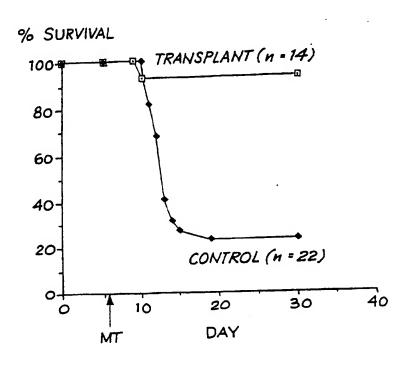


FIG. 7

INTERNATIONAL SEARCH REPORT

International Application No. PCT/AU 91/00155

	SIFICATION OF SURJECT MATTER (if several class	ification symbols apply,	indicate all) 6		
I. CLAS	to International Patent Classification (IPC)	or to both National Class	ification and IPC		
			1		
Int. Cl.5					
II. FIEL	DE SEARCHED	Documentation Searched 7			
Classifica	. 1011 070102 1	on symbots			
IPC	A61K 43/00, A61K 31/195				
	Documentation Searched other than H to the Extent that such Documents are Inclu	inimum Documentation ded in the Fields Searched	8		
AU: IP	C as above				
TTT 10001	MENTS CONSIDERED TO HE RELEVANT 9				
Category*	Citation of Document, with indication, of the relevant passages	where appropriate, !	Relevant to Claim No 13		
х	US.A. 4853209 (KAPLAN et al.) 1 August 1989 document, claims 1,9,11,12,17,18.		(1-9)		
х	US,A, 4882142 (SIMON et al.) 21 November 198 document, claims 1,5,7,8,13,14.	(1-9)			
X,P	US,A, 4976950 (SIMON et al.) 11 December 199 document, claims 1,3,5,6,7,10.	(1-9)			
A	EP,A, 164843 (THE DOW CHEMICAL COMPANY) 18 I See claim 1.	(1-3)			
A,P	EP,A, 375376 (THE DOW CHEMICAL COMPANY) 27 June 1990 (27.06.90) (1-3)				
	See claim 1.	(continued)			
*Special categories of cited documents: 10 *T* later document published after the international filing date or priority and not in conflict with the application of the particular relevance after the international filing date *E* earlier document but published on or after the international filing date *C* document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified) *O* document referring to an oral disclosure, use, exhibition or other means *P* document published prior to the international filing date but later than the priority date claimed *TV. CERTIFICATION *T* later document published after the international filing date or priority and not in conflict with the application cited to understand the principle or underlying the invention cannot be considered or cannot be considered or cannot be considered to involve an inventive step when the dois combined with one or more other su documents, such combination being obtouched in the art. *TV. CERTIFICATION					
-		Date of Mailing of th	is International		
Date of t	he Actual Completion of the onal Search	Search Report			
2 August	1991 (02.08.91)	1 13 August 91	-d 04440		
International Searching Authority Signature of Authorized Officer					
Australia	n Patent Office	test -	TAMARA NIZNIK		

Form PCT/ISA/210 (second sheet) (January 1985)

ETIDOTEICO TI	NFORMATION CONTINUED FROM THE SECOND SHEET	
LOIGHER T		1 (2 ()
A	US,A, 3965254 (TOFE et al.) 22 June 1976 (22.06.76) See entire document, column 9 lines 36-68.	(1-4)
A	'Goodman and Gilman's The Pharmacological Basis of Therapeutics' eds A.G. Gilman et al., seventh edition, published 1985, by Macmillan Publishing Company (New York) see page 1243.	(1-9)
]
٧. []	OBSERVATIONS WHERE CERTAIN CLAIMS WERE FOUND UNSEARCHABLE 1	
	rnational search report has not been established in respect of certain	claims under Article
17(2)(a)	for the following reasons:	•
	Claim numbers, because they relate to subject matter not required to searched by this Authority, namely:	ro De
	searched by this Authority, Homoty.	. :
2.[]	Claim numbers , because they relate to parts of the international app comply with the prescribed requirements to such an extent that no mean search can be carried out, specifically:	Lication that do not ingful international
3.[]	Claim numbers, because they are dependent claims and are not draft with the second and third sentences of PCT Rule 6.4 (8):	ed in accordance
VI. []	OBSERVATIONS WHERE UNITY OF INVENTION IS LACKING 2	
This Inte	ernational Searching Authority found multiple inventions in this intern us:	ational application
Ţ.,	As all required additional search fees were timely paid by the applican search report covers all searchable claims of the international applica	tion.
5.[]	As only some of the required additional search fees were timely paid by international search report covers only those claims of the internation which fees were paid, specifically claims:	the applicant, this
	No required additional search fees were timely paid by the applicant. international search report is restricted to the invention first mention it is covered by claim numbers:	Consequently, this oned in the claims;
4. []	As all searchable claims could be searched without effort justifying at the International Searching Authority did not invite payment of any add	n additional fee, ditional fee.
Remark o	on Protest additional search fees were accompanied by applicant's protest, protest accompanied the payment of additional search fees.	

ANNEX TO THE INTERNATIONAL SEARCH REPORT ON INTERNATIONAL APPLICATION NO. PCT/AU 91/00155

This Annex lists the known "A" publication level patent family members relating to the patent documents cited in the above-mentioned international search report. The Australian Patent Office is in no way liable for these particulars which are merely given for the purpose of information.

Cited	nt Document i in Search Report		Patent	: Family Memi	oers ·	
US	4853209	AU 80453/87 JP 63287729 ZA 8708169	DK NZ	5706/87 222304	. EP PT	291605 86020
us Us	4882142 4976950	AU 45440/89 DK 5827/89 EP 374501 JP 2237936	. •			
EP	164843	AU 41229/85 JP 61022029 US 4898724	CA NZ	1243603 211808	IL ZA	74902 8502799
EP	375376	AU 47009/89 CN 1046739 HU 54897	AU DK NO	48282/90 1959/90 903632	ER EP WO	8907255 408701 9006776
us	3965254	AU 69210/74 DE 2424453 NL 7406952	HE FR PH	815397 2230374 12898	CA GB ZA	1028246 1453667 7403159

END OF ANNEX

ANNEX TO THE INTERNATIONAL SEARCH REPORT ON INTERNATIONAL APPLICATION NO. PCT/AU 91/00155

This Annex lists the known "A" publication level patent family members relating to the patent documents cited in the above-mentioned international search report. The Australian Patent Office is in no way liable for these particulars which are merely given for the purpose of information.

	ent Document ed in Search Report			Patent	Family Member	cs		
US	4853209	JP	80453/87 63287729 8708169	DK NZ	5706/87 222304	EP PT	291605 86020	
us us	4882142 4976950	AU JP	45440/89 2237936	DK	5827/89	EP	374501	
EP	164843	AU JP US	41229/85 61022029 4898724	CA NZ	1243603 211808	IL ZA	74902 8502799	
EP	375376	AU CN HU	47009/89 1046739 54897	AU DK NO	48282/90 1959/90 903632	er Ep Wo	8907255 408701 9006776	
us	3965254	AU DE NL	69210/74 2424453 7406952	BE FR PH	815397 2230374 12898	CA GB ZA	1928246 1453667 7403159	

END OF ANNEX

LETHAL TOTAL BODY IRRADIATION IN WAG RATS

PLATELET CONC. (x109/L)

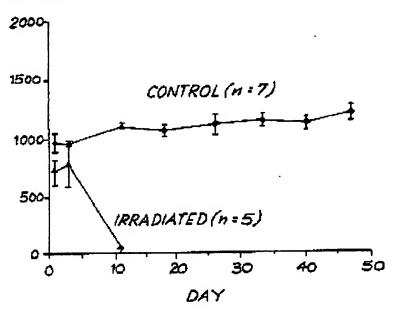


FIG. 1

SURVIVAL AFTER TBI & MARROW TRANSPLANTATION

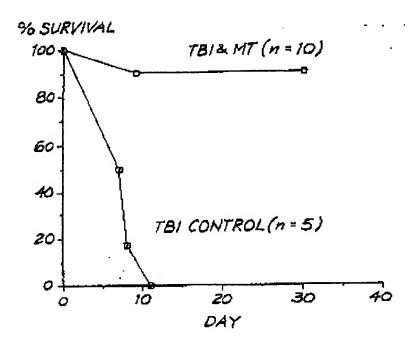


FIG. 2

MARROW TRANSPLANTATION AFTER LETHAL TBI

PLATELET CONC. (x103/L)

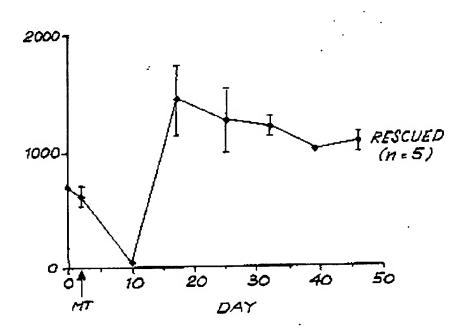


FIG. 3

IRRADIATION BY SAMARIUM-153-EDTMP: 3.5 GBq IV.

PLATELET CONC. (x 109/L)

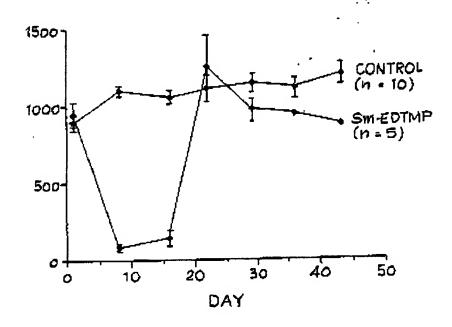


FIG.4

SURVIVAL AFTER 0.5-10.0 mg/kg MELPHALAN IP.

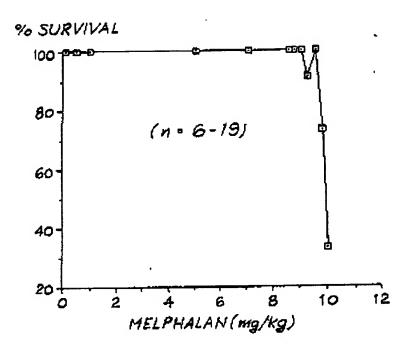
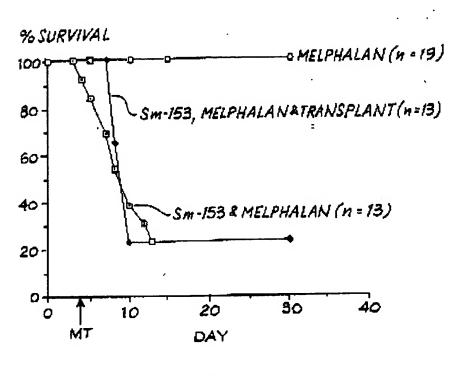


FIG.5

SURVIVAL AFTER CHEMORADIOTHERAPY: 9.5 mg/kg MELPHALAN and 555 mBq/kg 153Sm-EDTMP



F1G.6

1)

SURVIVAL AFTER SEQUENTIAL CHEMORADIOTHERAPY:

555 mBa/ka 153 Sm EDTMP	DAY	0
555 mBq/kg 153 Sm EDTMP 9.5 mg/kg MELPHALAN	**	
MARROW TRANSPLANTATION	"	6

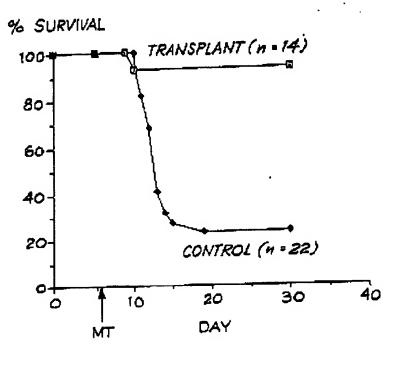


FIG.7